

Patricia Booker

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10596824

FILING DATE

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2						
3		2				
4		2				
5		2				
6						
7						
8						
9						
10						
11						
12						
13						
14						
15	1		1			
16						
17						
18						
19	1		1			
20						
21						
22						
23						
24						
25						
26	1		1			
27						
28						
29						
30						
31						
32						
33	1		1			
34						
35						
36						
37						
38						
39						
40						
41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	6		6			
TOTAL DEP.	58		44			
TOTAL CLAIMS	64		50			

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54						
55						
56						
57						
58						
59						
60						
61	1					
62						
63						
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65						
66						
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95						
96						
97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						